POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	T.D.	h	9.25.00
O.I.P.E. CLASSIFIER	GLN		9/30/2000
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW		67583	12.6 00

INDEX OF CLAIMS

✔	.... Rejected	N	....	Non-elected
=	.... Allowed	I	....	Interference
–	(Through numeral)... Canceled	A	....	Appeal
÷	.... Restricted	O	....	Objected

Claim		Date									
Final	Original	10/708	2/4/02	1/6/03	4/29/03						
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	16		N	✔							
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	50			✔	✔						

Claim		Date									
Final	Original	2/4/02	1/6/03	4/29/03							
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Claim		Date									
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**If more than 150 claims or 10 actions
staple additional sheet here**

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